

ALLIS CARE CENTER

9047 WEST GREENFIELD

WEST ALLIS 53214 Phone: (414) 453-9290

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 152

Total Licensed Bed Capacity (12/31/03): 152

Number of Residents on 12/31/03: 143

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 143

Limited Liability Company

Skilled

No

Yes

Yes

143

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		14.0
Supp. Home Care-Personal Care	No					1 - 4 Years		44.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	4.2	More Than 4 Years		21.7
Day Services	No	Mental Illness (Org./Psy)	17.5	65 - 74	10.5			----
Respite Care	Yes	Mental Illness (Other)	3.5	75 - 84	37.8			80.4
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.8	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.7		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	9.8		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	16.8	65 & Over	95.8	-----		
Transportation	No	Cerebrovascular	7.0		-----	RNs		5.1
Referral Service	No	Diabetes	3.5	Gender	%	LPNs		9.1
Other Services	No	Respiratory	4.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	36.4	Male	28.0	Aides, & Orderlies		
Mentally Ill	No		----	Female	72.0			34.8
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care					
			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)	Total Resi- dents	% Of All
Level of Care	No.	%		No.	%		No.	%		No.	%		No.	%		No.	%			
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	21	100.0	279	93	87.7	122	0	0.0	0	14	100.0	190	2	100.0	122	0	0.0	0	130	90.9
Intermediate	---	---	---	13	12.3	102	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	13	9.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	21	100.0		106	100.0		0	0.0		14	100.0		2	100.0		0	0.0		143	100.0

Admissions, Discharges, and Deaths During Reporting Period						
Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03						

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	7.1	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	0.0	Bathing	0.7	54.5	44.8	143
Other Nursing Homes	4.3	Dressing	2.8	81.1	16.1	143
Acute Care Hospitals	87.2	Transferring	14.7	52.4	32.9	143
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	7.7	74.8	17.5	143
Rehabilitation Hospitals	0.0	Eating	24.5	67.1	8.4	143
Other Locations	1.4	*****				
Total Number of Admissions	141	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.3		Receiving Respiratory Care	5.6
Private Home/No Home Health	38.1	Occ/Freq. Incontinent of Bladder	50.3		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	49.0		Receiving Suctioning	2.1
Other Nursing Homes	0.0				Receiving Ostomy Care	0.0
Acute Care Hospitals	17.3	Mobility			Receiving Tube Feeding	4.2
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	35.7
Rehabilitation Hospitals	0.0					
Other Locations	7.2	Skin Care			Other Resident Characteristics	
Deaths	37.4	With Pressure Sores	4.2		Have Advance Directives	86.7
Total Number of Discharges		With Rashes	2.1		Medications	
(Including Deaths)	139				Receiving Psychoactive Drugs	61.5

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	85.4	84.7	1.01	87.0	0.98	86.6	0.99	87.4	0.98
Current Residents from In-County	100	81.8	1.22	86.4	1.16	84.5	1.18	76.7	1.30
Admissions from In-County, Still Residing	34.0	17.7	1.93	18.9	1.80	20.3	1.68	19.6	1.73
Admissions/Average Daily Census	98.6	178.7	0.55	166.7	0.59	157.3	0.63	141.3	0.70
Discharges/Average Daily Census	97.2	180.9	0.54	170.6	0.57	159.9	0.61	142.5	0.68
Discharges To Private Residence/Average Daily Census	37.1	74.3	0.50	69.1	0.54	60.3	0.62	61.6	0.60
Residents Receiving Skilled Care	90.9	93.6	0.97	94.6	0.96	93.5	0.97	88.1	1.03
Residents Aged 65 and Older	95.8	84.8	1.13	91.3	1.05	90.8	1.05	87.8	1.09
Title 19 (Medicaid) Funded Residents	74.1	64.1	1.16	58.7	1.26	58.2	1.27	65.9	1.12
Private Pay Funded Residents	9.8	13.4	0.73	22.4	0.44	23.4	0.42	21.0	0.47
Developmentally Disabled Residents	0.0	1.1	0.00	1.0	0.00	0.8	0.00	6.5	0.00
Mentally Ill Residents	21.0	32.2	0.65	34.3	0.61	33.5	0.63	33.6	0.62
General Medical Service Residents	36.4	20.8	1.75	21.0	1.73	21.4	1.70	20.6	1.77
Impaired ADL (Mean)	57.1	51.8	1.10	53.1	1.07	51.8	1.10	49.4	1.15
Psychological Problems	61.5	59.4	1.04	60.0	1.03	60.6	1.02	57.4	1.07
Nursing Care Required (Mean)	6.7	7.4	0.91	7.2	0.94	7.3	0.93	7.3	0.92